

Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form
(CRF)?:: No

Number of copies of CRF::

Title:: OXAZOLIDINONES HAVING A BENZANNULATED 6- OR 7-
MEMBERED HETEROCYCLE

Attorney Docket Number:: 118.US1 DV1

Request for Early
Publication?:: No

Request for
Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets::

Application Data Sheet

Application Information

Small Entity?::

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type:: No

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: Paul
Middle Name:: D.
Family Name:: Johnson
Name Suffix::
City of Residence:: Kalamazoo
State or Province of Residence:: Michigan
Country of Residence:: USA
Street of mailing address:: 7060 S. 10th Street
City of mailing address:: Kalamazoo
State or Province of mailing address:: Michigan
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 49009

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: Paul
Middle Name:: Adrian
Family Name:: Aristoff
Name Suffix::
City of Residence:: Kalamazoo
State or Province of Residence:: Michigan
Country of Residence:: USA
Street of mailing address:: 1650 Brookmoor Lane
City of mailing address:: Kalamazoo
State or Province of mailing address:: Michigan
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 49002

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Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: Toni-Jo
Middle Name::
Family Name:: Poel
Name Suffix::
City of Residence:: Pinckney
State or Province of Residence:: Michigan
Country of Residence:: USA
Street of mailing address:: 2681 Patterson Lake Road
City of mailing address:: Pinckney
State or Province of mailing address:: Michigan
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 48169
Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: Lisa
Middle Name:: Marie
Family Name:: Thomasco
Name Suffix::
City of Residence:: Groton
State or Province of Residence:: Connecticut
Country of Residence:: USA
Street of mailing address:: 600 Meridian Street Extension, Apt. 323
City of mailing address:: Groton
State or Province of mailing address:: Connecticut
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 06340

Correspondence Information

Correspondence Customer Number:: 25533
Name:: Pharmacia & Upjohn Company
Street of mailing address:: Global Intellectual Property
301 Henrietta Street
City of mailing address:: Kalamazoo
State or Province of mailing address:: MI
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 49007
Phone number:: (269) 833-9500
Fax Number:: (269) 833 2316
E-Mail address::

Representative Information

Representative Customer Number::	25533
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